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## REQUEST FOR WITHDRAWAL AS ATTORNEY OR AGENT

Application Number	10/017,201		
Filing Date	12/14/2001		
First Named Inventor	Jeffrey D. Walker		
Group Art Unit	3662		
Examiner Name	Not Yet Known		
Attorney Docket Number	21153-05930		

To: Commissioner for Patents

P.O. Box 1450

Alexandria, VA 22313-1450

I hereby apply to withdraw as attorney or agent for the above-identified patent application. The client has been duly notified of this request for withdrawal and provided with all papers and property to which the client is entitled.

The reasons for this request are:

The client knowingly and freely assents to termination of the employment.

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				AIL	_		
1.   The corresponder	nce address is NOT affected by this w	ithdrawal.					
2.   Change the correspondence address and direct all future correspondence to:							
Firm <i>or</i> Individual Name	Eric L. Maschoff						
Address	Workman, Nydegger & Seeley						
Address	60 E. South Temple, Suite 1000						
City	Salt Lake City	State	UT	Zip	84111		
Country	US						
Telephone	(801) 533-9899	Fax	(801) 321-8873				
☐ This request is made on behalf of myself and ☐ all the attorneys/agents of record, / ☑ the attorneys/agents (with registration numbers) listed on the attached paper(s), or ☐ the attorneys/agents associated with Customer Number On whose behalf I have signed this request and on whose behalf I am authorized to sign. The request is enclosed in triplicate (including any attachments).							
Name	Greg Tysueoka						
Signature	Gues Mur						
Date	May 8, 20 <del>03</del>		·				
NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.							

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Attorneys/agents to be removed with attached Request to Withdraw:

Greg T. Sueoka, Reg. No. 33,800 Michael W. Farn, Reg. No. 41,015 Michael Weber, Reg. No. 50,591



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